

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO. **10/088408**

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	1		1				51					
2	1		1				52					
3	2		1				53					
4	1		1				54					
5	1		1				55					
6	1		1				56					
7	1		1				57					
8	1		1				58					
9	1		1				59					
10	1		1				60					
11	1		1				61					
12	1		1				62					
13	2		1				63					
14	1		1				64					
15	①		1				65					
16	1		1				66					
17	1		1				67					
18	1		1				68					
19			1				69					
20			1				70					
21			1				71					
22			1				72					
23			1				73					
24			1				74					
25			1				75					
26			1				76					
27			1				77					
28			1				78					
29			1				79					
30			1				80					
31			1				81					
32			1				82					
33			1				83					
34			1				84					
35			1				85					
36			1				86					
37			1				87					
38			1				88					
39			1				89					
40			1				90					
41			1				91					
42			1				92					
43			1				93					
44			1				94					
45			1				95					
46			1				96					
47			1				97					
48			1				98					
49			1				99					
50			1				100					
TOTAL IND.		1	1	1								
TOTAL DEP.		26	26	26								
TOTAL CLAIMS		51	51	51								

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Barbara Campbell
National Stage Processing
(703) 305-3831